SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 13 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Scott Mellis Date of Receipt Mailing Address 777 Old Saw Mill River Road 2015 26 City Zip Code State Transaction ID: SA11AI.4327 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation VP - Clinical Sciences Trans. Medicine Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) Full Name (Last, First, Middle Initial) B. Hala Mirza Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 26 2015 City State Zip Code Transaction ID: SA11AI.4326 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP - Corporate Communications Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) Full Name (Last, First, Middle Initial) c. William Olson Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 26 2015 City State Zip Code Transaction ID: SA11AI.4331 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 С federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP - Research & Development Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) 1153.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....